

State of New Jersey

DEPARTMENT OF HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES CN 712 TRENTON, NEW JERSEY 08625

MEDICAID COMMUNICATION NO. 94-10

DATE: May 16, 1994

TO:

County Welfare Directors

SUBJECT:

New Jersey Care...Special Medicaid Programs

Medically Needy Segment Fact Sheets

I am pleased to announce the availability of newly formatted Fact Sheets for the Medically Needy Program. Attached is an initial supply of 100 copies for your use.

Please feel free to distribute these publications in any manner suitable for your agency. Unfortunately, due to budget and space limitations, we will not be maintaining a shelf stock and ask that you produce additional copies as needed beyond this initial supply.

If you have any questions about this communication or need additional information about the Fact Sheets, please contact Sandra Stangil of the Office of Eligibility Policy and Operations at (609) 588-2556.

Sincerely.

Alan G. Wheeler

Acting Director

AGW:Ss

Attachments

c: Marion Reitz, Director

Division of Family Development

Nicholas R. Scalera, Director Division of Youth & Family Services

STATE OF NEW JERSEY

DEPARTMENT OF HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

A NEW JERSEY CARE . . . Special Medicaid Program MEDICALLY NEEDY SEGMENT

Have you been denied Medicaid in the past because your income or assets were too high?

Have you lost your Medicaid and Supplemental Security Income payments because you receive Social Security Disability payments?

Are you 65 years of age or older, but still have high medical bills which are not covered by Medicare?

Do you have young children who need medical care that you cannot afford?

Are you pregnant? Unable to afford prenatal care? Are you worried about the hospital cost for your delivery?

The Medically Needy Program may help you. It provides medical coverage to certain needy individuals who may not be able to afford health care services, and who do not qualify for the regular Medicaid program.

TO QUALIFY FOR SERVICES, you must be

- A pregnant woman
- A needy child (under 21 years of age)
- Aged (65 years of age or older)
- Blind or disabled

AND

- Your income must fall at or below certain limits. You may meet the income limit immediately or at a later time after using a special "spend-down" method described on the reverse side. If you are over the asset limit, you cannot be eligible for the Medically Needy Program.

MEDICALLY NEEDY INCOME AND ASSET LIMITS							
Family Size	1	2	3	4	5	6	
Maximum Monthly Income	\$433	\$500	\$591	\$683	\$758	\$833	
Maximum Current Assets	\$4,000	\$6,000	\$6,100	\$6,200	\$6,300	\$6,400	

COUNTED AS MONTHLY INCOME

- Social Security Income
- Pensions, annuities
- Interest or dividends
- Gross wages, tips, commissions
- Inheritances, gifts, prizes
- Legal settlements
- Unemployment compensation
- Public or private disability compensation
- Veteran's benefits

- Payments from trust funds
- Alimony or child support
- Worker's compensation
- Rental income
- The income of your spouse may be counted in your income determination
- The income of parent(s) of needy children will be counted

COUNTED AS RESOURCES

- Money in bank accounts
- A car in certain situations*
- Property OTHER than that in which you live
- Stocks, bonds, or certificates of deposit
- Trust funds or retirement accounts
- Some life insurance policies
- Some personal effects
- Some household goods

*a car needed for work or transportation for medical treatment is not counted

IF YOUR MONTHLY INCOME IS TOO HIGH, you may still be able to meet the program's income limit by subtracting certain items that fit your situation. For example:

Families with needy children can subtract

- \$90 of wages for each employed person,
- \$50 of total child support received, and
- the actual cost of child care up to a maximum of:

Parent(s) Employed Full-Time

Parent(s) Employed Part-Time

Child Under Age 2

\$200

\$150

Other Children

\$175

\$135

Aged, blind and disabled persons can subtract the first \$20 of unearned income (such as Social Security or pension income).

You might be able to meet the income limit in another way. The Medically Needy Program uses a unique process called "spend down". "Spend down" is the process of subtracting certain medical bills and health insurance premiums from your income until it is equal to the monthly income limit you must reach.

For Example:

- you are applying just for yourself; there are no others in your family. According to the chart on the reverse side, your monthly income cannot be more than \$433 and your assets cannot be more than \$4,000.
- Your assets total \$3,100. So far you qualify for the program.
- Your monthly income is determined to be \$483. This is \$50 more than the limit.
- Since eligibility is determined in six-month periods, you will have to "spend down" a total of \$300 (\$50/month x 6 months) to be eligible for the program.
- Within the next two months, you have several medical bills. They total more than \$300.
- You show these bills to the county welfare agency where you applied. You will be eligible for the Medically Needy Program.

BASIC PACKAGE OF SERVICES FOR ALL GROUPS

- Physician Services
- Laboratory and X-ray Services
- Optometric Services
- Personal Care Assistant Services
- Prosthetic and Orthotic Devices**
- Medical Supplies and Equipment
- Home Health Services
- Psychological Services
- Medical Transportation Services- Independent Clinic Services*
- (health centers, family planning
- ripment clinics, mental health centers)
- Dental Services
- Eyeglasses
- Audiology Services (hearing aids)
- Outpatient Hospital
- Services

ADDITIONAL SERVICES

PREGNANT WOMEN:

Inpatient Hospital, Podiatry Services, Medical Day Care

Services, Prescribed Drugs, Chiropractic Services

NEEDY CHILDREN:

Prescribed Drugs

AGED, BLIND OR DISABLED:

Podiatry Services, Medical Day Care Services

If you think you might be eligible for this Medically Needy Program or need additional information, contact your county welfare agency/board of social services. Below are the telephone numbers:

	COUNTY	TELEPHONE NUMBER
	Atlantic	(609) 348-3001
	Bergen	(201) 368-4200
	Burlington	(609) 261-1000
	Camden	(609) 225-8266
	Cape May	(609) 886-6200
	Cumberland	(609) 691-4600
	Essex	(201) 733-3039
•	Gloucester	(609) 582-9200
	Hudson	(201) 420-3000/3157
	Hunterdon	(908) 788-1300
*	Mercer	(609) 989-4664
	Middlesex	(908) 745-3550
	Monmouth	(908) 431-6300
	Morris	(201) 326-7272
	Ocean	(908) 349-1500
	Passaic	(201) 881-3228/3229
	Salem	(609) 299-7200, Ext. 233
	Somerset	(908) 526-8800
	Sussex	(201) 383-3600
	Union	(908) 965-2700
	Warren	(908) 475-4744
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^{*}You may obtain rehabilitation services (such as physical therapy, occupational therapy and speech therapy) through a home health agency, independent clinic, or outpatient hospital clinic, and audiology services through an independent clinic or outpatient hospital clinic.

^{**}Such as artificial limbs or orthopedic shoes .